

C.C.
11/2
AG

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AS</i>		<i>07/28/12</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>SL</i>	<i>811</i>	<i>11/15/12</i>
RESPONSE FORMALITY REVIEW	<i>SS</i>	<i>773</i>	<i>10/31/10</i> <i>04-11-01</i>

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
- (Through numeral)	Canceled	A	Appeal
	Restricted	O	Objected

Claim	Date	Claim	Date	Claim	Date
1		52		101	
2		53		102	
3		54		103	
4		55		104	
5		56		105	
6		57		106	
7		58		107	
8		59		108	
9		60		109	
10		61		110	
11		62		111	
12		63		112	
13		64		113	
14		65		114	
15		66		115	
16		67		116	
17		68		117	
18		69		118	
19		70		119	
20		71		120	
21		72		121	
22		73		122	
23		74		123	
24		75		124	
25		76		125	
26		77		126	
27		78		127	
28		79		128	
29		80		129	
30		81		130	
31		82		131	
32		83		132	
33		84		133	
34		85		134	
35		86		135	
36		87		136	
37		88		137	
38		89		138	
39		90		139	
40		91		140	
41		92		141	
42		93		142	
43		94		143	
44		95		144	
45		96		145	
46		97		146	
47		98		147	
48		99		148	
49		100		149	
50				150	

If more than 150 claims or 10 actions
staple additional sheet here

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